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Please type a plus sign (+) inside this box → ☐**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	<b>Application Number</b>	09/923,716	
	<b>Filing Date</b>	August 7, 2001	
	<b>First Named Inventor</b>	Kramer et al.	
	<b>Group Art Unit</b>	1641	
	<b>Examiner Name</b>	Counts, Gary W.	
<b>Total Number of Pages in This Submission</b>	10	<b>Attorney Docket Number</b>	AP33451 070180.0144

**ENCLOSURES (check all that apply)**

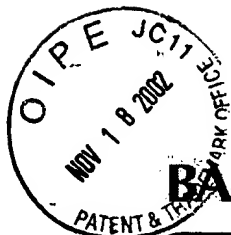
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) : _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Substitute Sequence Listing in paper and computer-readable form; and Return Receipt Postcard
<b>Remarks</b> <input type="checkbox"/>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

<b>Firm or Individual name</b>	BakerBotts LLP 30 Rockefeller Plaza New York, NY 10112	
<b>Signature</b>	Att Name: James J. Maune PTO Reg: 26,946	
<b>Date</b>	November 14, 2002	

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: November 14, 2002		
<b>Typed or printed name</b>	James J. Maune	
<b>Signature</b>		<b>Date</b> November 14, 2002

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**FEE TRANSMITTAL  
for FY 2002**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT**

(\$ 0)

**Complete if Known**

Application Number	09/923,716
Filing Date	August 7, 2001
First Named Inventor	Kramer et al.
Examiner Name	Counts, Gary W.
Group Art Unit	1641
Attorney Docket No.	AP33451 070180.0144

**METHOD OF PAYMENT**

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit  
Account  
Number

02-4377

Deposit  
Account  
Name

Baker Botts LLP

- ☒ Charge Any Additional Fee Required  
Under 37 CFR 1.16 and 1.17

- ☐ Applicant claims small entity status.  
See 37 CFR 1.27

2. ☐ **Payment Enclosed:**

☐ Check ☐ Credit card ☐ Money  
Order ☐ Other

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
740	370	Utility filing fee	
330	165	Design filing fee	
510	255	Plant filing fee	
740	370	Reissue filing fee	
160	80	Provisional filing fee	

**SUBTOTAL (1)** (\$ 0)**2. EXTRA CLAIM FEES**

	Extra Claims	Fee from below	Fee Paid
Total Claims	20 ** = 0	X	= 0
Independent Claims	3 ** = 0	X	= 0
Multiple Dependent			

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
18	9	Claims in excess of 20
84	42	Independent claims in excess of 3
280	140	Multiple dependent claim, if not paid
84	42	** Reissue independent claims over original patent
18	9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)**

(\$ 0)

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	For filing a request for <i>ex parte</i> reexamination	
920*	920*	Requesting publication of SIR prior to Examiner action	
1,840*	1,840*	Requesting publication of SIR after Examiner action	
110	55	Extension for reply within first month	
400	200	Extension for reply within second month	
920	460	Extension for reply within third month	
1,440	720	Extension for reply within fourth month	
1,960	980	Extension for reply within fifth month	
320	160	Notice of Appeal	
320	160	Filing a brief in support of an appeal	
280	140	Request for oral hearing	
1,510	1,510	Petition to institute a public use proceeding	
110	55	Petition to revive - unavoidable	
1,280	640	Petition to revive - unintentional	
1,280	640	Utility issue fee (or reissue)	
460	230	Design issue fee	
620	310	Plant issue fee	
130	130	Petitions to the Commissioner	
50	50	Processing fee under 37 CFR 1.17(q)	
180	180	Submission of Information Disclosure Stmt	
40	40	Recording each patent assignment per property (times number of properties)	
740	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
740	370	For each additional invention to be examined (37 CFR § 1.129(b))	
740	370	Request for Continued Examination (RCE)	
900	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$ 0)**SUBMITTED BY**Name (Print/Type) **James J. Maune**Registration No.  
(Attorney/Agent)

26,946

**Complete (if applicable)**

Telephone (212) 408-2500

Signature

Date November 14, 2002

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

 **BAKER BOTTS** LLP

Attorney Docket Number: AP33451 070180.0144

Title: PROCESS FOR DETECTING THREONINE/SERINE KINASE ACTIVITY

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Use Space Below for Additional Information:

NOTICE TO COMPLY WITH REQUIREMENTS FOR PATENT APPLICATIONS CONTAINING  
NUCLEOTIDE SEQUENCE AND/OR AMINO ACID SEQUENCE DISCLOSURES

The nucleotide and/or amino acid sequence disclosure contained in this application does not comply with the requirements for such a disclosure as set forth in 37 CFR 1.821 - 1.825 for the following reason(s):

- ☐ 1. This application clearly fails to comply with the requirements of 37 CFR 1.821-1.825. Applicant's attention is directed to these regulations, published at 114 OG 29, May 15, 1990 and at 55 FR 18230, May 1, 1990.
- ☐ 2. This application does not contain, as a separate part of the disclosure on paper copy, a "Sequence Listing" as required by 37 CFR 1.821(c).
- ☐ 3. A copy of the "Sequence Listing" in computer readable form has not been submitted as required by 37 CFR 1.821(e).
- ☐ 4. A copy of the "Sequence Listing" in computer readable form has been submitted. However, the content of the computer readable form does not comply with the requirements of 37 CFR 1.822 and/or 1.823, as indicated on the attached copy of the marked-up "Raw Sequence Listing."
- ☒ 5. The computer readable form that has been filed with this application has been found to be damaged and/or unreadable as indicated on the attached CRF Diskette Problem Report. A substitute computer readable form must be submitted as required by 37 CFR 1.825(d).
- ☐ 6. The paper copy of the "Sequence Listing" is not the same as the computer readable form of the "Sequence Listing" as required by 37 CFR 1.821(e).
- ☐ 7. Other: \_\_\_\_\_

Applicant must provide:

- ☐ An initial or substitute computer readable form (CRF) copy of the "Sequence Listing"
- ☐ An initial or substitute paper copy of the "Sequence Listing", as well as an amendment directing its entry into the specification
- ☐ A statement that the content of the paper and computer readable copies are the same and, where applicable, include no new matter, as required by 37 CFR 1.821(e) or 1.821(f) or 1.821(g) or 1.825(b) or 1.825(d)

For questions regarding compliance with these requirements, please contact

For Rules Interpretation, call (703) 308-1123  
For CRF submission help, call (703) 308-4212  
For PatentIn software help, call (703) 557-0400

Please return a copy of this notice with your response.

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PATENT

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Kramer et al.

TECH CENTER 1600/2900

Serial No. : 09/923,716

Examiner : Counts, Gary W.

Filed : August 7, 2001

Group Art Unit : 1641

For : PROCESS FOR DETECTING THREONINE/SERINE KINASE  
ACTIVITYRESPONSE TO NOTICE OF DEFECTIVE REPLY

I hereby certify that this paper is being deposited with the United States Postal Service as first class mail in an envelope addressed to:  
Assistant Commissioner for Patents, Washington, D.C. 20231

November 14, 2002

Date of Deposit

James J. Maune

Attorney Name

26,946

PTO Registration No.

  
SignatureNovember 14, 2002

Date of Signature

Assistant Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

This paper is being filed in response to the Office Communication dated November 4, 2002. Applicants enclose herewith a Substitute Sequence Listing in paper and computer-readable form.